1	I hereby certify that this correspondence is being an envelope addressed to the Commissioner for Date of Deposit:	r Patents, PO Box 1450	ited States Postal Service as first class mail in , Alexandria, VA 22313-1450
2	Typed Name of Person Mailing Paper or Fee:	Thomas Olson	
3	Signature:	-	
4	OIPEVE		PATENT APPLICATION
5	JUN 1 5 2005 &		DOCKET NO. 10007009-1
6	NUM 1		
7	TRADEMARKS TRATES D	IN THE	
8	UNITED STATES P	ATENT AND TR	RADEMARK OFFICE
9	INVENTORS: Jeffrey Balluff et	al	CONFIRMATION NO.: 2802
10	SERIAL NO.: 09/864,738	ai.	GROUP ART UNIT: 2654
	FILING DATE: 05/23/2001		EXAMINER: Azad, Abul K.
11			
12	TITLE: TELECOMMUNICA	TION APPARAT	US AND METHODS
13			
14	Mail Stop: AF		
15	Commissioner For Patents		
16	P.O. BOX 1450		
17	Alexandria, VA 22313-1450		
	DEDLY TO OFFI		U ED ON 00/40/04
18	SIR OR MADAM:	CE ACTION MA	ILED ON 08/10/04
19		esnonse to the fi	nal action mailed on 04/20/05.
20	This communication is in the		nar action matica on 04/20/00.
21	Claim Summary:		
22	Claims hereby amended: 1	, 11, 15, 17 and	18.
23	Claims hereby canceled: 2.		
24	Claims hereby added: none	э.	
25	Claims remaining: 1, 3 and	5-20.	
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ATTORNEY DOCKET NO. 10007009-1

IN THE

UNITED STATES PATENT AND TRADEMARK OFFICE

Jeffrey Balluff et al.

Confirmation No.: 2802

Application No.: 09/864,738

Examiner: Azad, Abul K.

Filing Date:

JUN 1 5 2005

nventor

& TRADE

05/23/2001

Group Art Unit:

2654

Title:

Telecommunication Apparatus and Methods

Mail Stop AF **Commissioner for Patents** PO Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

3ir:			
Tran	smitted herewith is/are the following in the al	bove-identified app	lication:
(X)	Response/Amendment	()	Petition to extend time to respond
()	New fee as calculated below	()	Supplemental Declaration
(X)	No additional fee		
(X)	Other: Return Receipt Post Card		(fee \$)

(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3) NUMBER EXTRA	IMBER HIGHEST NUMBER		(5) PRESENT EXTRA		(6) RATE		(7) ADDITIONAL FEES	
TOTAL CLAIMS	***	MINUS			=	0	×	\$50	\$	(
INDEP. CLAIMS		MINUS			=	0	×	\$200	\$	C
[] FIR:	ST PRESENTATION OF	A MULTIPLE	DEPENDEN	T CLAIM			+	\$360	\$	(
EXTENSION FEE	1ST MONTH \$120.00		MONTH 3RD MONT 0.00 \$1020.00				\$ 0			
OTHER FEES								\$		
			TOTAL A	ADDITIONAL FE	E FOR	THIS A	MENE	OMENT	\$	

to Deposit Account 08-2025. At any time during the pendency of this 0 application, please charge any fees required or credit any overpayment to Deposit Account 08-2025 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 08-2025 under 37 CFR 1.16 through 1.21 inclusive, and any other sections in Title 37 of the Code of Federal Regulations that may regulate fees. A duplicate copy of this sheet is enclosed.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450.

Date of Deposit: June 13, 2005

Typed Name: Thomas Olson

Signature:

Respectfully submitted,

Jeffrey Balluff et al.

Thomas Olson

Attorney/Agent for Applicant(s)

Reg. No. 44,271

Date: June 13, 2005

Telephone No.: (509) 327-4748